S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 86 / 504 (check only one)
IT	EMIZED RECEIPTS		or each category of the	(check only one) X 11a 11b 11c 12
			Detailed Summary Page	13 14 15 16 17
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the na	tements may ame and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{}$	NAME OF COMMITTEE (In Full)		·	
\rangle	Minnesota Democratic Farmer Labor Pa	ırty		
۹.	Full Name (Last, First, Middle Initial) David Potter			Date of Receipt
	Mailing Address 801 Washington Ave N			111 / 27 / Y Y Y Y Y Y
	City	State Zip Code		Transaction ID: 61207.C359815
	Minneapolis	MN	55402	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Oppenheimer Wolff & Donel-	Occupation Attorney		Memo
	Receipt For:	Aggregate Year-to-Date ▼		[MEMO ITEM]
	Primary General Other (specify) ▼		0.00	AKV Memo
3.	Full Name (Last, First, Middle Initial) Gary Pruitt			Date of Receipt
	Mailing Address 1185 Burns Ave #1			1 1 0 2 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 61204.C359098
	Saint Paul	MN	55106	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		200.00
	Name of Employer Retired	Occupation Retired	n	Receipt
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		200.00	
).	Full Name (Last, First, Middle Initial) Linda Quinn			Date of Receipt
	Mailing Address 2119 River Road S			10 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 61025.C357964
	Lakeland	MN	55043	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		200.00
	Name of Employer Homemaker	Occupation Homema		Receipt
	Receipt For:		e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	200.00	
SUBTOTAL of Receipts This Page (optional)				
Ţ.	OTAL This Period (last page this line number or	nlv)		
	VIAL THIS I GHOW (TAST PAYE THIS THE HUTTIDE OF	пу <i>)</i>	······································	